EMERGENCY edro Transporter 1 Acknowledgement of Receipt af Materials 6 Printed/Typed Name CASE

Month	63	Ŏ
I Month	Day	v

Transporter 2 Acknowledgement of Receipt of Materials

Day Month

Day

Year

Month

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardaus materials covered by this manifest except as noted in Item 19 Printed/Typed Name

TRISTATE

DO NOT WRITE BELOW THIS LINE.

Blue: GENERATOR SENDS THIS COPY TO DTSC WITHIN 30 DAYS. To:

P.O. Box 400, Sacramento, CA 95812-0400

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